

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00532705	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>FF PAC</b>		Date of Public Distribution/Dissemination 10 / 07 / 2020	
Mailing Address 611 Pennsylvania Avenue, SE Suite 143		Amount 5000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.-2147483641
Purpose of Expenditure Research (Estimate)		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Hawkfish LLC</b>		Date of Public Distribution/Dissemination 10 / 06 / 2020	
Mailing Address 909 Third Avenue		Amount 20453.50	
City New York	State NY	Zip Code 10022	Transaction ID : SE.-2147483639
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate BIDEN, JOSEPH R JR, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25453.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wolfson, Howard, , ,

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b>	
		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00532705         </div>	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			

Full Name of Payee <b>Hawkfish LLC</b>			Date of Public Distribution/Dissemination		
Mailing Address 909 Third Avenue			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
City New York	State NY	Zip Code 10022	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10272.50</div>		
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<b>Transaction ID : SE.-2147483637</b> Date of Disbursement or Obligation		
Name of Federal Candidate TRUMP, DONALD J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">14244869.23</div>		
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►		

Full Name of Payee <b>Hawkfish LLC</b>			Date of Public Distribution/Dissemination		
Mailing Address 909 Third Avenue			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
City New York	State NY	Zip Code 10022	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">721.00</div>		
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<b>Transaction ID : SE.-2147483631</b> Date of Disbursement or Obligation		
Name of Federal Candidate BIDEN, JOSEPH R JR., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">14245590.23</div>		
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">10993.50</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00532705	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Hawkfish LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 07 / 2020</b>	
Mailing Address <b>909 Third Avenue</b>		Amount <b>5027.00</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10022</b>	Transaction ID : <b>SE.-2147483629</b>
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>TRUMP, DONALD J., ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Hawkfish LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 07 / 2020</b>	
Mailing Address <b>909 Third Avenue</b>		Amount <b>728.00</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10022</b>	Transaction ID : <b>SE.-2147483627</b>
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>BIDEN, JOSEPH R JR., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>5755.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00532705         </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name of Payee <b>Hawkfish LLC</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address 909 Third Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8891.00</div>	
City New York	State NY		
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : <b>SE.-2147483625</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">14349286.23</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee <b>Schoen Cooperman Research</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address 1111 Park Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12500.00</div>	
City New York	State NY		
Purpose of Expenditure Research (Estimate)		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : <b>SE.-2147483643</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">14329640.23</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px;">21391.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px;"> </div>

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NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00532705	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>SKDKnickerbocker LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 07 / 2020</b>	
Mailing Address <b>1150 18th Street, NW</b> <b>Suite 800</b>		Amount <b>71550.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Transaction ID : <b>SE.-2147483645</b>
Purpose of Expenditure Television Advertising Production (Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>TRUMP, DONALD J., ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>SKDKnickerbocker LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 07 / 2020</b>	
Mailing Address <b>1150 18th Street, NW</b> <b>Suite 800</b>		Amount <b>8500.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Transaction ID : <b>SE.-2147483623</b>
Purpose of Expenditure Digital Advertising Production (Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>TRUMP, DONALD J., ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>80050.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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NAME OF COMMITTEE (In Full) <b>Independence USA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00532705
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Waterfront Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 06 / 2020</b>
Mailing Address 3050 K Street, NW Suite 100		Amount <b>6185064.54</b>
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Television Advertising Buy	Category/ Type <b>004</b>	Transaction ID : <b>SE-2147483633</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 01 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>6185064.54</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>6328707.54</b>

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